
Full Name of Party Filing Document

Mailing Address (Street or Post Office Box)

City, State and Zip Code

Telephone

Email Address (if any)

IN THE DISTRICT COURT FOR THE _____ JUDICIAL DISTRICT
FOR THE STATE OF IDAHO, IN AND FOR THE COUNTY OF _____

_____,
Petitioner,
vs.
_____,
Respondent.

Case No. _____
ORDER FOR GENETIC TESTS

Based on the request of _____ asking this court to order
genetic tests pursuant to Idaho Code §7-116, IT IS ORDERED:

1. The child, _____, mother, _____, and
alleged father, _____, shall submit to genetic testing to be
performed by an expert qualified as an examiner of genetic markers;
2. Verified documentation shall establish a chain of custody of the genetic evidence;
3. A verified expert's report shall be prepared by a laboratory approved by the American
Association of Blood Banks or other accreditation body; and
4. A written report of the genetic test results shall be filed with the court and admitted into
evidence without further foundation, pursuant to I.R.C.P. 6(c)(7), unless a challenge to the
testing procedures or the genetic analysis has been made twenty-one (21) days before trial.
5. The genetic test report shall be served upon all parties as soon as it is obtained.
6. _____, as the requesting party, is ordered to pay the initial
costs of testing; however, such costs shall be recovered by the prevailing party.

Date: _____

Judge

CLERK'S CERTIFICATE OF SERVICE

I certify that a copy of this Order was served:

(Name)

(Street or Post Office Address)

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☐ By United States mail

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(Name)

(Street or Post Office Address)

(City, State, and Zip Code)

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☐ By personal delivery

☐ By fax (number) _____

Date: _____

Deputy Clerk